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STATE OFFICE OF RURAL HEALTH  
ADVISORY BOARD MEETING  
STATE OFFICE OF RURAL HEALTH  
June 1, 2017

**Present:** Robin Rau, Member  
Kay Floyd, Member  
Ann Addison, Member  
Sheila Ramer, Member  
LaDon Toole, Member  
Ajay Gehlot, Member  
Joe Robinson, Member  
Damien Scott, Member  
Stuart Tedders, Member

**SORH Staff:** Patsy Whaley, SORH Executive Director, Ex-Officio  
Sheryl McCoy, Board Recording Secretary  
Lisa Carhuff, SORH  
David Glass, SORH  
Dawn Waldrip, SORH  
Nita Ham, SORH

**Absent:** Jennie Wren Denmark, Member  
O.J. Booker, Member  
Carla Belcher, Member

**Visitors:** Karen Daniels, Warm Springs Medical Center  
Kimberly Miller, Morgan Memorial Hospital  
Laura Gentry, Medical Center of Peach County  
Tracie Haughey, Wills Memorial Hospital  
Alyssa L. Meller, Rural Health Innovations ( RHI)  
Kami Norland, Rural Health Innovations (RHI)  
Kara Klein, CCLS, Children's Health Care of Atlanta

***Opening Remarks:***

The meeting was called to order by Stuart Tedders, Secretary, SORH Advisory Board, in the absence of Jennie Wren Denmark, Chairperson.

Stuart asked for the approval of the minutes and they were approved as submitted.



**GEORGIA DEPARTMENT  
OF COMMUNITY HEALTH**

*SORH Advisory Board Minutes  
October 6, 2016  
Page | 2*

He also asked for introductions of members and visitors.

Lisa Carhuff introduced the newest program in Hospital Services FLEX grant for Population Health. She introduced Alyssa Meller and Kami Norland from the National Rural Health Resource Center in Duluth, Minnesota. They were chosen for the sub-grantee because they are the innovators for all the CAH hospitals nationally and for the benefit hospitals in Georgia will gain by using the tools being used across the nation.

Alyssa joined the center in December 2013 and has a 10 year history in managed care of Medicaid and Medicare. She has a Masters degree in psychology and sociology.

Kami Norland brings a fresh can do and how about attitude that inspires others to look outside the norm. She is a current member of Minnesota Rural Health Association and active in the Minnesota Department of Public Health. She has a Masters degree in Art Therapy and is a Registered Art Therapist.

The Rural Health Innovations (RHI) is a subsidiary of the National Rural Health Resource Center (The Center), the nation's leading technical assistance and knowledge centers in rural health. In partnership with The Center, RHI connects rural Health organizations with innovations that enhance the health of rural communities.

The health care environment is changing in several ways:

- Triple Aim - Better Care + Smarter Spending = Healthier People.
- Federal health care transformation includes health care systems, payment models, Insurance benefits/program and other changes to come in the next 2 years
- State Medicaid programs moving toward managed care models
- Commercial insurers steering patients to lower cost options

There are seven critical success factors that equal Population Health:

- Leadership
- Strategic Planning
- Patients, Partners & Communities
- Data Collection, Management & Analysis
- Operations & processes
- Workforce
- Outcomes & Impact

Outcomes and Impact Strategies for Success:

- Identify measurable goals that reflect community needs.
- Utilize data to monitor progress towards strategic goals on population health
- Publicly share goals, data and outcomes
- Participate in opportunities for shared savings, models, such as Accountable Care Organizations

Members of the Board shared their experiences related to the work of the RHI along with solutions that have been successful, as well as those that have not been successful, in their facilities and in their communities. The complete powerpoint is available upon request.



**GEORGIA DEPARTMENT  
OF COMMUNITY HEALTH**

*SORH Advisory Board Minutes  
October 6, 2016  
Page | 3*

Nita Ham shared that SORH is partnering with Children's Healthcare of Atlanta (CHOA) to produce a good education product for child abuse prevention to distribute among the rural areas of Georgia that will improve healthcare outcomes. She introduced Kara Klein from CHOA to give an update on the Child Abuse Education Program.

Kara shared that in 2010 they learned for the first time that nonaccidental trauma was the leading cause of trauma-related death at Children's Healthcare of Atlanta. They obtained an initiative to form The Partnerships for Healthy Communities: Child Abuse Intervention and Prevention Program (PHC), a child abuse prevention course for emergency medical services (EMS), fire, law enforcement, 911 dispatch, and nurses was developed to address this concerning trend.

The program is a three hour course and there is no charge for the course. Course topics include:

- Recognition of child physical abuse and patterned injuries
- Documentation standards with case studies and scenarios
- Mandated reporter requirements for Georgia
- Prevention strategies applicable to every 911 call

In 2015, there were 26,952 substantiated cases of child abuse and neglect in Georgia and 113 child maltreatment deaths.

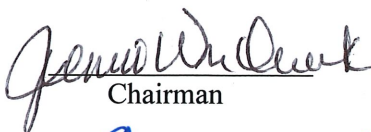
CHOA has partnered with the State Office of Rural Health to expand the program into rural areas of Georgia and focus efforts on regions with high child abuse rates. The course serves to increase child abuse awareness and provide useful prevention strategies for emergency responders.

Nita explained they will strategically place the classes in the rural areas to help accommodate the facilities who are understaffed and need to send a few staff at a time. She encouraged everyone to help get all the partners to the table to obtain the best results for the program.

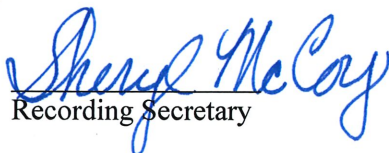
Patsy stated that the CHOA Education project came from SORH Advisory Board recommendations. She encouraged the Board members to make recommendations for future projects and programs needed in the rural communities where they serve. She suggested that elder abuse may be a needed project.

The meeting adjourned 3:00 PM.

Respectively,

  
Chairman

  
Secretary

  
Recording Secretary